

Every Drop Counts!



Outreach program application for: -2006-

Thank you for your request. You will receive a phone call after our program office has received this form. At that time, programs will be scheduled. All reservations are on a first come/first serve basis. Separate reservations must be made for each time frame and type of program desired. The Bureau of Reclamation & California State Parks look forward to the opportunity to pass on the importance of our water and its uses to your participants in the comfort of your facility. These programs at your location are at **no cost** to you!!!

| Date(s) requested: | | and/or W TH | | | | | | | |
|---|-----------|--|----------------------|----------------------------|--------------|-----------|-------|----------|--|
| Date(s) requested: M TU | W TH | | | | | F | | | |
| Please check one desired program | per page. | | | | 1 | • | | | |
| Please choose | | | Time desired: | | | | | | |
| Program you would like: | Grade/age | Please refer to program details on information sheet | | Am | Pm | | | | |
| Water, Power & More | level | OITII | IIOIIIIau | on sneet | | | | | |
| water, Power & More | | | | | | | | | |
| Follow the Flow! | | | | | | | | | |
| Water ABC's | | | | | | | | | |
| Every Drop Counts | | | | | | | | | |
| Where is my Watershed? | | | | | | | | | |
| (available to 3 rd – 6 th only) | | | | | | | | | |
| Water, Water, Everywhere! | | | | | | | | | |
| (available to preschool – 1 st only) | | | | | | | | | |
| The Magic of Water | | | | | | | | | |
| Adult Supervision is required for on site p | rogram | | | | | | | | |
| Your Name: | | | | | | | | | |
| roui Name: | | | | Can you furnis | sh? | | yes | no | |
| E mail address: | | | | Auditorium | | | | | |
| | | | | Classroom | | | | <u> </u> | |
| Street address: | | | | Other room type | | | | - | |
| Aciling address. | | | | Tables – how m TV & VCR | iany? | | | 1 | |
| Mailing address: | | | | Screen/blank w | all for slid | o show | | + | |
| City: | | | | Electricity | | | | + | |
| | | | | Water | | | | 1 | |
| State: Zip | : | | | Shaded outside | e area | | | | |
| | | | | Black/white boa | | | | | |
| Phone #: | | | | | | | | † | |
| ·av· | | | _ | | | is form t | | | |
| ax: | | | Aı | merican Rive | er Wate | r Educat | ion C | :en | |
| Group type, age/grade: | | | | at | Folsor | n Dam | | | |
| 1 91 1 3 3 3 1 | | | | Α | ttn: Sch | eduler | | | |
| # of children:# of Adults: | | | 7794 Folsom Dam Road | | | | | | |
| OFFICE USE ONLY: Date rec | | | | Fol | som. CA | 95630 |) | | |

Fax #: (916) 989-7151

Call (916) 989-7275 for more information

logged in FTP sent confirmation

Arwec/fiel-rograms/everydropcounts/programquest-5/24/06-pc

 \Box Called back